FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K01118

BRYMAR FINANCIAL GROUP, INC.

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90307 007 ***150.00



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Principal Place of Business Mailing Address						4. 1 1988 1984 1985 1886 1886 1986 1986 1	, 9)941 9 1911 9394	1) bibii ainii ihdi	
4401 N. HILLSBORO BLVD. 4401 N. HILLSBORO BLVD.									
COCONUT CREEK FL 33073 COCONUT CREEK FL 33073						DO NOT WRITE IN TH	DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed			
						11/09/1987			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	Applied For		
21		26				65-0018496		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	- 7			5. Certificate of Status Desired		Additional Required	
City & State		City & State				6. Election Campaign Financing	\$5.0	0 May Be	
23		28				Trust Fund Contribution		d to Fees	
Zip	Country	Zip				8. This corporation owes the current year		531	
24	25					Personal Property Tax.	Yes	X No	
	Name and Address of Current	t Registered Agent		0.4	N	10. Name and Address of New Registers	a Agent		
WEIN		81 Name							
	iberg, daniel J. N. Hillsboro BLVD.		Ī		Street Addres	ss (P.O. Box Number is Not Acceptable)		,	
COC	ONUT CREEK FL 33073		-	83					
	·		ļ.	84	City		85 Zir	Code	
<u>,</u>	·			_L		F		the registered	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of choffice or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointr agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								registered	
SIGNATURE	·								
	Signature, typed or printed name of registered ager		_	gent	signature required v				
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECT		
TITLE	PSTD	☐ DELETE	1.1 TITL				CJonango	0 [],,40,40,1	
NAME	WEINBERG, DANIEL J.		1.2 NAM]]	
STREET ADDRESS	4401 N. HILLSBORO BLVD.				ADDRESS [
CITY-ST-ZIP	COCONUT CREEK FL 33073	C or ere	1.4 CITY		ZIP		Change	e	
TITLE	•		2.1 TITL					e Dyddigon	
NAME			2.2 NAN						
STREET ADDRESS					ADDRESS			}	
CITY-ST-ZIP			2.4 CITY-ST-ZIP		-21P · ·			e [] Addition	
TITLE			3.1 TITL				Change	e 🗀 Addition	
NAME	I .		3.2 NAN	Æ.					
STREET ADDRESS	RESS		3.3 STREET ADDRESS		ADDRESS			i	
CITY-ST-ZIP			3.4. CfT		-ZiP				
TITLE		☐ DELETE	4.1 TITL				Change	e	
NAME	e e e e e e e e e e e e e e e e e e e		4. 2 NAI	ME				ì	
STREET ADDRESS	#				ADDRESS			Ì	
CITY-ST-ZIP			4.4 CIT		-ZIP	<u> </u>			
TITLE		☐ DELETE	5.1 TITL			,	Change	e 🗌 Addition	
NAME			5.2 NAN						
STREET ADDRESS	T				ADDRESS			ļ	
CITY-ST-ZIP	·		5.4 CIT		-ZIP				
TITLE		□ DELETE	6.1 TITL		}		Change	e 🔲 Addition	
NAME			6.2 NAN					1	
STREET ADDRESS	A COMPLETE SERVICE		6.3 STR	REET	ADDRESS	•			

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: